

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>10/07/00</i>
O.I.P.E. CLASSIFIER	<i>RSD</i>		<i>6/13/00</i>
FORMALITY REVIEW	<i>NH</i>	<i>617</i>	<i>7-24-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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